



PTO/SB/21 (09-04)

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|---------------------------------------------------------------------------------------------|------------------------|-------------------|
| <b>TRANSMITTAL<br/>FORM</b><br><br>(to be used for all correspondence after initial filing) | Application Number     | 10/734934         |
|                                                                                             | Filing Date            | December 12, 2003 |
|                                                                                             | First Named Inventor   | Johan Rune        |
|                                                                                             | Art Unit               | N/A               |
|                                                                                             | Examiner Name          | Not Yet Assigned  |
| Total Number of Pages in This Submission                                                    | Attorney Docket Number | 53807-00020USPT   |

**ENCLOSURES (Check all that apply)**

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> Fee Transmittal Form<br><input type="checkbox"/> Fee Attached<br><input checked="" type="checkbox"/> Amendment/Reply<br><input type="checkbox"/> After Final<br><input type="checkbox"/> Affidavits/declaration(s)<br><input type="checkbox"/> Extension of Time Request<br><input type="checkbox"/> Express Abandonment Request<br><input type="checkbox"/> Information Disclosure Statement<br><input type="checkbox"/> Certified Copy of Priority Document(s)<br><input type="checkbox"/> Reply to Missing Parts/Incomplete Application<br><input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Drawing(s)<br><input type="checkbox"/> Licensing-related Papers<br><input type="checkbox"/> Petition<br><input type="checkbox"/> Petition to Convert to a Provisional Application<br><input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address<br><input type="checkbox"/> Terminal Disclaimer<br><input type="checkbox"/> Request for Refund<br><input type="checkbox"/> CD, Number of CD(s) _____<br><input type="checkbox"/> Landscape Table on CD | <input type="checkbox"/> After Allowance Communication to TC<br><input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences<br><input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)<br><input type="checkbox"/> Proprietary Information<br><input type="checkbox"/> Status Letter<br><input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):<br>Return Receipt Postcard,<br>Amendment Transmittal Ltr. |
| <b>Remarks</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |

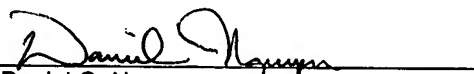
**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

|              |                                                 |          |        |
|--------------|-------------------------------------------------|----------|--------|
| Firm Name    | JENKENS & GILCHRIST, A PROFESSIONAL CORPORATION |          |        |
| Signature    |                                                 |          |        |
| Printed name | Daniel G. Nguyen                                |          |        |
| Date         | 2/24/05                                         | Reg. No. | 42,933 |

I hereby certify that this correspondence is being deposited with the U.S. Postal Service with sufficient postage as First Class Mail, in an envelope addressed to: MS Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.

Dated: \_\_\_\_\_ Signature: \_\_\_\_\_ ( )



| AMENDMENT TRANSMITTAL LETTER                                                                                                                                                                                                                                                   |                                           |                                         |                                   | Docket No.<br>53807-00020USPT |      |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------|-----------------------------------------|-----------------------------------|-------------------------------|------|
| Application No.<br>10/734934                                                                                                                                                                                                                                                   |                                           | Filing Date<br>December 12, 2003        |                                   | Examiner<br>Not Yet Assigned  |      |
|                                                                                                                                                                                                                                                                                |                                           |                                         |                                   | Art Unit<br>N/A               |      |
| Applicant(s): Johan Rune et al.                                                                                                                                                                                                                                                |                                           |                                         |                                   |                               |      |
| Invention: BRIDGING BETWEEN A BLUETOOTH SCATTERNET AND AN ETHERNET LAN                                                                                                                                                                                                         |                                           |                                         |                                   |                               |      |
| <b>TO THE COMMISSIONER FOR PATENTS</b>                                                                                                                                                                                                                                         |                                           |                                         |                                   |                               |      |
| Transmitted herewith is an amendment in the above-identified application.                                                                                                                                                                                                      |                                           |                                         |                                   |                               |      |
| The fee has been calculated and is transmitted as shown below.                                                                                                                                                                                                                 |                                           |                                         |                                   |                               |      |
| <b>CLAIMS AS AMENDED</b>                                                                                                                                                                                                                                                       |                                           |                                         |                                   |                               |      |
|                                                                                                                                                                                                                                                                                | Claims<br>Remaining<br>After<br>Amendment | Highest<br>Number<br>Previously<br>Paid | Number<br>Extra Claims<br>Present | Rate                          |      |
| Total Claims                                                                                                                                                                                                                                                                   | 50                                        | - 50 =                                  |                                   | x                             | 0.00 |
| Independent<br>Claims                                                                                                                                                                                                                                                          | 2                                         | - 3 =                                   |                                   | x                             | 0.00 |
| Multiple Dependent Claims (check if applicable) <input type="checkbox"/>                                                                                                                                                                                                       |                                           |                                         |                                   |                               |      |
| Other fee (please specify):                                                                                                                                                                                                                                                    |                                           |                                         |                                   |                               |      |
| <b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:</b>                                                                                                                                                                                                                                |                                           |                                         |                                   |                               | 0.00 |
| <input checked="" type="checkbox"/> Large Entity <input type="checkbox"/> Small Entity                                                                                                                                                                                         |                                           |                                         |                                   |                               |      |
| <input checked="" type="checkbox"/> No additional fee is required for this amendment.                                                                                                                                                                                          |                                           |                                         |                                   |                               |      |
| <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of \$ _____.<br>A duplicate copy of this sheet is enclosed.                                                                                                                                     |                                           |                                         |                                   |                               |      |
| <input type="checkbox"/> A check in the amount of \$ _____ to cover the filing fee is enclosed.                                                                                                                                                                                |                                           |                                         |                                   |                               |      |
| <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.                                                                                                                                                                                                    |                                           |                                         |                                   |                               |      |
| <input checked="" type="checkbox"/> The Director is hereby authorized to charge and credit Deposit Account No. <u>10-0447</u><br>as described below. A duplicate copy of this sheet is enclosed.                                                                               |                                           |                                         |                                   |                               |      |
| <input checked="" type="checkbox"/> Credit any overpayment.                                                                                                                                                                                                                    |                                           |                                         |                                   |                               |      |
| <input checked="" type="checkbox"/> Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.                                                                                                                                           |                                           |                                         |                                   |                               |      |
| <br>Daniel G. Nguyen<br>Attorney Reg. No.: 42,933                                                                                                                                           |                                           |                                         |                                   | Dated: <u>2/24/05</u>         |      |
| JENKENS & GILCHRIST, A PROFESSIONAL CORPORATION<br>1445 Ross Avenue, Suite 3200<br>Dallas, Texas 75202<br>(214) 855-4500                                                                                                                                                       |                                           |                                         |                                   |                               |      |
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| Dated: _____ Signature: _____ ( )                                                                                                                                                                                                                                              |                                           |                                         |                                   |                               |      |

IFW



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Dated: \_\_\_\_\_ Signature: \_\_\_\_\_ ( )

Docket No.: 53807-00020USPT  
(PATENT)

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re Patent Application of:  
Johan Rune et al.

Application No.: 10/734934

Art Unit: N/A

Filed: December 12, 2003

Examiner: Not Yet Assigned

For: BRIDGING BETWEEN A BLUETOOTH  
SCATTERNET AND AN ETHERNET LAN

**FIRST PRELIMINARY AMENDMENT**

MS Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Dear Sir:

**INTRODUCTORY COMMENTS**

Prior to examination on the merits, please amend the above-identified U.S. patent application as follows:

**Amendments to the Drawings** begin on page 2 of this paper and include both an attached replacement sheet and an annotated sheet showing changes.

**Remarks/Arguments** begin on page 3 of this paper.

An **Appendix** including amended drawing figures is attached following page 3 of this paper.